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\*\* CONTINUING DATA \*\*\*\*\*  
 NO LJA

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
 NO LJA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no LJA 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance LJA Verified and Acknowledged Examiner's Signature _____ Initials LJA	STATE OR COUNTRY WA	SHEETS DRAWING 12	TOTAL CLAIMS 71	INDEPENDENT CLAIMS 9
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